## Case 19-30347 Doc 1 Filed 03/18/19 Entered 03/18/19 14:13:48 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture	Karen First name  Janeen Middle name  Williams	First name  Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Karen McKinstry	
	Include your married or maiden names.	ŕ	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4869	

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Case number (if known)

Debtor 1 Karen Janeen Williams

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		253 Franklin Court Stanley, NC 28164 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Gaston County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Debtor 1 Karen Janeen Williams Document Page 3 of 56 Case number (if known)

Par	Tell the Court About	Your B	Sankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		<b>■</b> C	hapter 13						
8.	How you will pay the fee		about how yo	entire fee when I file my petition. Please check with the clerk's office in your local court for more detain but may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with address.					
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Indi	viduals to Pay		
			_		,	only if you are filing for Chapter 7. By law	v, a judge may,		
			but is not req applies to you	uired to, waive y ur family size ar	your fee, and may do so only if yond you are unable to pay the fee in	ur income is less than 150% of the official ninstallments). If you choose this option, y ial Form 103B) and file it with your petition	poverty line that ou must fill out		
9.	Have you filed for bankruptcy within the	■ No	0.						
	last 8 years?	□ Ye	es.						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No	n						
	cases pending or being filed by a spouse who is not filing this case with	□ Ye							
	you, or by a business partner, or by an affiliate?								
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	Go to I	ine 12.					
		□ Ye	es. Has yo	our landlord obta	ained an eviction judgment agains	t you?			
				No. Go to line	12.				
				Yes. Fill out In this bankruptcy		Judgment Against You (Form 101A) and fi	le it as part of		

Debtor 1	Karen Janeen Williams	Document	Page 4 of 56	Case number (if known)	

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	ss. Name and location of business						
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code				
	it to this petition.		Check	k the appropriate bo	x to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))				
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))				
				None of the above					
13. Are you filing under Chapter 11, the court must know whether you are a small business deltor, you must attach your most re bankruptcy Code and are you a small business debtor, as small business debtor, you must attach your most re operations, cash-flow statement, and federal income tax return or if any of these documents in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of					
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		ig under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.							
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?					
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code				

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Debtor 1 Karen Janeen Williams

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Karen Janeen Williams

Document Page 6 of 56

Case number (if known)

Part	6: Answer These Questi	ions for Re	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal,  ☐ No. Go to line 16b.	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an				
			Yes. Go to line 17.						
		16b.							
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	nat are not consumer debts or business de	ebts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		□ No						
	be available for distribution to unsecured creditors?		□Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 ■ \$500,001 - \$1 million		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	<b>□</b> \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Part	7: Sign Below								
I have examined this petition, and I declare under Junited States Code. I understand the relief avoid ocument, I have obtained and read the notice of I request relief in accordance with the chapter I understand making a false statement, conce bankruptcy case can result in fines up to \$250 and 3571.  Is Karen Janeen Williams  Karen Janeen Williams  Signature of Debtor 1				n aware that I may proceed, if eligible, uncavailable under each chapter, and I choos ay or agree to pay someone who is not an ice required by 11 U.S.C. § 342(b).  er of title 11, United States Code, specified realing property, or obtaining money or proceeding property, or obtaining money or proceeding property.  Signature of Debtor 2	der Chapter 7, 11,12, or 13 of title 11, be to proceed under Chapter 7.  attorney to help me fill out this  d in this petition.  operty by fraud in connection with a				
		Executed	on March 18, 2019 MM / DD / YYYY	Executed on MM / DI	D / YYYY				

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Debtor 1 Karen Janeen Williams Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Beth B	. Carter	Date	March 18, 2019
Signature of	f Attorney for Debtor		MM / DD / YYYY
Beth B. Ca	arter 24642		
Printed name			
The Law C	Offices of Beth B. Carter, PLLC		
P.O. Box 1			
Denver, N			
Number, Street,	, City, State & ZIP Code		
Contact phone	704-966-8028	Email address	beth@bbcarterlaw.com
24642 NC			
Bar number & S	State		

Page 8 of 56 Document Fill in this information to identify your case: Karen Janeen Williams First Name Middle Name Last Name First Name Middle Name (Spouse if, filing) Last Name WESTERN DISTRICT OF NORTH CAROLINA United States Bankruptcy Court for the:

> ☐ Check if this is an amended filing

## Official Form 106Sum

Debtor 1

Debtor 2

Case number (if known)

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	607,637.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,257.95
	1c. Copy line 63, Total of all property on Schedule A/B	\$	619,894.95
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	302,309.50
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	113,595.63
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	150,000.00
	Your total liabilities	\$	565,905.13
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,582.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,965.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bayashald purposes." 14.1.1.5.0. \$ 101(9). Fill out lines 8.00 for statistical purposes. 28.1.5.0. \$ 150	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 9 of 56 Case number (if known) Debtor 1 Karen Janeen Williams

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,261.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	113,595.63
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	150,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	263,595.63

	Ca	se 19-3034 <sup>-</sup>	7 Doc 1		03/18/19 :ument	Entered 03/18/19 Page 10 of 56	9 14:13:	48 Des	sc Main		
Fill	in this inform	nation to identify	your case and th			F 800: 10 (11.)()					
Deb	otor 1	Karen Janee		e Name		Last Name					
	otor 2 use, if filing)	First Name		e Name		Last Name					
Unit	ted States Bar	nkruptcy Court for	the: WESTERN	DISTR	CT OF NORT	TH CAROLINA					
Cas	se number					_				k if this is an ded filing	
Sc	chedul	rm 106A/E e A/B: Pi	operty	an asset	only once. If a	an asset fits in more than one	category, list	the asset in	the category	12/15	
hink nfor Ansv	it fits best. Be mation. If more ver every quest	e as complete and a space is needed, sion.	accurate as possibl attach a separate sl	e. If two heet to th	married people nis form. On the	e are filing together, both are e e top of any additional pages, vn or Have an Interest In	equally respo	nsible for su	pplying corr	ect	
						land, or similar property?					
	_		ultable interest in a	illy resid	ence, bunding,	ianu, or similar property?					
_	No. Go to Part										
	Yes. Where is	the property?									
1.1				What	is the property	? Check all that apply					
	253 Frankl								deduct secured claims or exemptions. Put		
	Street address, r	f available, or other des	cription		Duplex or mul	· ·		ount of any secured claims on Schedule D: ors Who Have Claims Secured by Property.			
					Condominium	or cooperative					
						or mobile home	Current val	ue of the	Current va	alue of the	
	Stanley City	NC State	ZIP Code		Land		entire prop	erty? <b>7,006.00</b>	portion yo	ou own? 577,006.00	
	City	State	ZIF Code		Investment pro Timeshare	operty				· · · · · · · · · · · · · · · · · · ·	
					Other		(such as fe	e nature of you			
				_		in the property? Check one	a life estate	e), if known.			
	Gaston				Debtor 1 only Debtor 2 only		. 00 31111				
	County				Debtor 1 and I	Debtor 2 only	CI	te abla to the			
						f the debtors and another		if this is com ructions)	munity prop	erty	
						ou wich to add about this itam	such as lac	and .			

Official Form 106A/B Schedule A/B: Property page 1

property identification number:

Tax Value \$577,006

Purchased in June 2007 for \$550,000

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Debte	or 1 <b>K</b>	aren Janeen Will	iams		Ca	ase number (if known)		
1.2	If you o	wn or have more	than one, lis		t is the property? Check all that apply			
	COO D-6	Cin I ama		wna	t is the property? Check all that apply			
_		fin Lane			Single-family home			ims or exemptions. Put
	Street addre	ss, if available, or other des	scription		Duplex or multi-unit building			d claims on Schedule D: ns Secured by Property.
					Condominium or cooperative	Greditors who hav	e Clairi	is decured by I Toperty.
					Manufactured or mobile home	Current value of the	ho	Current value of the
	Gastoni	a NC	28052-0000	) 🗆	Land	entire property?	ie	portion you own?
_	City	State	ZIP Code		Investment property	\$30,631	.00	\$30,631.00
					Timeshare	December the meter		
					Other			our ownership interest ancy by the entireties, or
				Who	has an interest in the property? Check one	a life estate), if kn		
					Debtor 1 only	Fee simple		
_	Gaston				Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	— Chack if this i	ie com	munity property
					At least one of the debtors and another	(see instructions)		mumity property
					r information you wish to add about this i erty identification number:	item, such as local		
				Pur	chased in Dec 2007 for \$65,000 Value \$30,631			
	ages you	•	-		your entries from Part 1, including a er here	-		\$607,637.00
someo B. Ca	one else o		vehicle, also re	eport it on (	iny vehicles, whether they are registe Schedule G: Executory Contracts and U prcycles		any ve	nicies you own that
		BMW				Do not deduct secu	ured cla	aims or exemptions. Put
3.1	Make:				an interest in the property? Check one	the amount of any	secure	d claims on <i>Schedule D:</i>
	Model:	X3		■ Debtor	-	Creditors Who Hav	e Clain	ns Secured by Property.
	Year:	2006	100.000	Debtor	,	Current value of t	he	Current value of the
		nate mileage:	160,000		1 and Debtor 2 only	entire property?		portion you own?
		ormation:		☐ At leas	one of the debtors and another			
	I	BSPA93496WG7	6618			\$3,875	00	\$3,875.00
	I	sed in 2017	ANAD		if this is community property tructions)	Ψ5,075	.00	φ3,673.00
		es: 4 door SUV, of, power window		(300 1113	il delions)			
		, power window , power locks, po						
		cruise control, a						
		am/fm radio, lea						
		theft deterrent sy						
	alarm		, = 10,					
	Nada C Condti	Clean Trade-In: \$3 on: Fair: 4x4 no						
	works							

Official Form 106A/B Schedule A/B: Property page 2

Debtor <sup>-</sup>	Case 19-  Karen Jane		Filed 03/18/19 Document	Entered 03/18/1 Page 12 of 56	9 14:13:48 number (if known)	Desc Main
V P F p p c a a N	Make: Ford  Model: Explorer  Year: 2000  Approximate mileage:  Other information:  VIN: 1FMZU75E0  Purchased in 201  Features: 4 door  power windows,  power locks, power lock	260,000 DYZB14477 8 SUV, 4WD, power brakes, ver seats, c, cd player, h seats, alarm e In: \$ 1,175 High mileage	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is communicate instructions)	nly rs and another	the amount of any Creditors Who Har Current value of the entire property?  \$1,175	portion you own?
■ No □ Ye	the dollar value of	f the portion you own	for all of your entries fro	owmobiles, motorcycle accommobiles, accommobiles, motorcycle accommobiles, motorcycle accommobiles, a	entries for	\$5,050.00
.page	es you have attach	ed for Part 2. Write th	at number here		=>	\$3,030.00 
Do you  6. Hous  Exar  □ No	own or have any leads of the second goods and apples: Major applian		rest in any of the follow	ng items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		vacuum, oven, gr appliances, kitch utensils, cookwa den furniture, ma bedroom 3 furniti	ill, washer, space hea en table and chairs, k re, dining room furnitu ster bedroom furnitu ure, lamps, mirrors, w ems, blankets, linens,	sher, dryer, gas logs, ater, small kitchen itchen bar stools, dish ure, living room furnit re, bedroom 2 furnitur rindow treatments, pic sheets, office furnitur	ure, e, tures,	\$3,515.00
	mples: Televisions a including cel	and radios; audio, video I phones, cameras, me	, , , , , , , , , , , , , , , , , , , ,	ment; computers, printers,	scanners; music o	ollections; electronic devices
			round sound, i-pod, 2 k, laptop, printer, 3 c	Play Station-II, compo ell phones	uter,	\$1,110.00
Exar	other collect	figurines; paintings, prions, memorabilia, colle		ks, pictures, or other art ob	ojects; stamp, coin,	or baseball card collections;

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Case number (if known) Document Debtor 1 Karen Janeen Williams 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$50.00 Taurus 38 revolver 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... wardrobe for 1 adult female \$750.00 wardrobe for 2 minor children 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$100.00 costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5.525.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Cash

☐ No

Yes......Institution name:

\$100.00

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Case number (if known)

Document Debtor 1 Karen Janeen Williams

		17.1.	Checking	Acct # 6303 with Wells	Fargo		\$320.00
_		17.2.	Checking	Acct # 6871 with Capita	I One		\$400.00
18.	Bonds, mutual funds Examples: Bond fund			okerage firms, money market accou	nts		
	■ No □ Yes		Institution or issuer	name:			
19.	Non-publicly traded : joint venture  □ No	stock and	interests in incorp	orated and unincorporated busing	esses, including a	an interest in an LL	.C, partnership, and
	Yes. Give specific in						
		Na	me of entity:		% of owners	hip:	
		Co		ounseling Coaching & service based only,	100	%	\$0.00
		No	laptive Interventi Assets No Debt ring for autistic (	, Service business entity	100	%	\$0.00
21.	Retirement or pensic Examples: Interests in No Yes. List each accord	Iss on accoun o IRA, ERI unt separa	uer name:  ts SA, Keogh, 401(k),	403(b), thrift savings accounts, or otl	her pension or prof	ït-sharing plans	
							<b>\$052.05</b>
_		401(l	к)	T. Rowe Price - ERISA o	qualified		\$862.95
22.	Examples: Agreemen  ■ No	ed deposi	ts you have made s	o that you may continue service or u public utilities (electric, gas, water),	telecommunication		hers
	☐ Yes			Institution name or individua			
23.	■ No	for a perio	dic payment of mon	ey to you, either for life or for a numl	per of years)		
		lssuer nam	ne and description.				
24.	Interests in an educate 26 U.S.C. §§ 530(b)(1)			qualified ABLE program, or under	a qualified state t	uition program.	
		Institution I	name and description	n. Separately file the records of any	interests.11 U.S.C	. § 521(c):	
25.	Trusts, equitable or f ■ No	uture inte	rests in property (	other than anything listed in line 1	), and rights or po	owers exercisable	for your benefit
	☐ Yes. Give specific in	nformation	about them				

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Case number (if known) Document Debtor 1 Karen Janeen Williams 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Guardian Life Insurance Term Policy Trenton Wiliiams** \$0.00 Face Value: \$51,000 **Guardian Accidental Term Policy Trenton Williams** \$0.00 Face Value: \$51,000 **Guardian Life Insurance Term Policy Trenton Williams** \$0.00 Face Value: \$100,000 **Guardian Accidental Death Term Policy Trenton Williams** \$0.00 Face Value: \$100,000 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information..

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Doc 1

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55. Part 1: Total real estate, line 2 ...... \$607,637.00 Part 2: Total vehicles, line 5 \$5,050.00 57. Part 3: Total personal and household items, line 15 \$5,525.00 58. Part 4: Total financial assets, line 36 \$1,682.95 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$12,257.95 Copy personal property total \$12,257.95

Official Form 106A/B Schedule A/B: Property page 7

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$619,894.95

	Docume	ent Page 17 of 56	<u> </u>	
mation to identify your	case:			
Karen Janeen Wi	lliams			
First Name	Middle Name	Last Name	_	
First Name	Middle Name	Last Name		
ankruptcy Court for the:	WESTERN DISTRICT C	OF NORTH CAROLINA		
				☐ Check if this is an amended filing
	Karen Janeen Wi First Name	Karen Janeen Williams First Name Middle Name  First Name Middle Name	Mation to identify your case:       Karen Janeen Williams       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name	Karen Janeen Williams   First Name   Middle Name   Last Name

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty You	u Claim a	s Exempt
---------	----------	-----------	-----------	-----------	----------

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 □ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
 For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 253 Franklin Ct Stanley, NC 28164 N.C. Gen. Stat. § \$577,006.00 \$35,000.00 **Gaston County** 1C-1601(a)(1) Purchased in June 2007 for \$550,000 100% of fair market value, up to Tax Value \$577,006 any applicable statutory limit Line from Schedule A/B: 1.1 2006 BMW X3 160,000 miles N.C. Gen. Stat. § 1C-1601(a)(3) \$3.500.00 \$3,875.00 VIN: WBSPA93496WG76618 Purchased in 2017 100% of fair market value, up to Features: 4 door SUV, 4WD, sunroof, any applicable statutory limit power windows, power brakes, power locks, power seats, cruise control, a/c, cd player, am/fm radio, leather seats, theft deterrent system. alarm Nad

Line from Schedule A/B: 3.1

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De	btor 1 Karen Janeen Williams	Boodinent	•	Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	stove, microwave, refrigerator,	\$3,515,00	•	\$3,515.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	dishwasher, dryer, gas logs, vacuum, oven, grill, washer, space heater, small kitchen appliances, kitchen table and chairs, kitchen bar stools, dishware, utensils, cookware, dining room furniture, living room furniture, den  Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	4 televisions, surround sound, i-pod, 2 Play Station-II, computer,	\$1,110.00		\$1,110.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	photocopier, clock, laptop, printer, 3 cell phones Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Taurus 38 revolver Line from Schedule A/B: 10.1	\$50.00		\$50.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	Line noin Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
	wardrobe for 1 adult female wardrobe for 2 minor children	\$750.00		\$325.00	N.C. Gen. Stat. § 1C-1601(a)(4)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Acct # 6303 with Wells Fargo	\$320.00		\$320.00	N.C. Gen. Stat. § 1-362
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Acct # 6871 with Capital One	\$400.00		\$400.00	N.C. Gen. Stat. § 1-362
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	401(k): T. Rowe Price - ERISA qualified	\$862.95		\$862.95	11 U.S.C. § 522(b)(3)(C)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3  No  Yes. Did you acquire the property covere  No	years after that for ca	ses fi	,	,
	☐ Yes				

		Document	Page 19	of 56		
Fill in this inform	nation to identify you	ur case:				
Debtor 1	Karen Janeen V	Williams				
Debtor 1	First Name	Middle Name	Last Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	: WESTERN DISTRICT OF NO	RTH CAROLIN	IA		
	., .,	-			=	
Case number _						
(if known)					_	if this is an
					amend	led filing
Official Form	106D					
		. M/II 11 Ol-1	0			
Schedule	D: Creditors	Who Have Claims	Secured	by Propert	<u>y</u>	12/15
		If two married people are filing togetl out, number the entries, and attach it				
1. Do any creditors	have claims secured b	y your property?				
☐ No. Check	this box and submit t	this form to the court with your othe	r schedules. Yo	ou have nothing else	to report on this form.	
_	all of the information	•		<b>0</b>	•	
		below.				
	I Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cress a particular claim, list the other creditor		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's nan		Do not deduct the	that supports this	portion
Gaston Co	ounty Tay			value of collateral.	claim	If any
2.1 Administr	•	Describe the property that secures	the claim:	\$443.84	\$30,631.00	\$0.00
Creditor's Name		609 Doffin Lane Gastonia, N	NC 28052			
		Gaston County				
		Purchased in Dec 2007 for	\$65,000			
		Tax Value \$30,631	• Ob a all all the at			
PO Box 15	-	As of the date you file, the claim is: apply.	: Cneck all that			
Gastonia,	NC 28053	☐ Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
M/h a auraa tha da	h42 Obselvens	Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only			mortgage or sec	urea		
Debtor 2 only						
Debtor 1 and De	eptor 2 only ne debtors and another	☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit	echanic's lien)			
Check if this cla		_ ~	Property Ta	ayes		
community del		Other (including a right to offset)	Troporty To			
Date debt was incu	urred 2018	Last 4 digits of account num	nber <u>4267</u>			
	_					
2.2 Harvey Sc		Describe the property that secures		\$301,865.66	\$577,006.00	\$0.00
Creditor's Name	•	253 Franklin Ct Stanley, NC	; 28164			
	f The Futura	Gaston County Purchased in June 2007 for				
Circuits C	•	\$550,000				
Trust	e Mortgage	Tax Value \$577,006				
	organ Street	As of the date you file, the claim is:	: Check all that			
	_ 33602-2328	apply. □ Contingent				
	City, State & Zip Code	☐ Unliquidated				
	•	☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or sec	ured		
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	ne debtors and another	☐ Judgment lien from a lawsuit				

Official Form 106D

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Debtor 1	Karen Janeer	n Williams		Case number (if know)	
	First Name	Middle Name	Last Name		
	t if this claim relate nunity debt	s to a Othe	r (including a right to offset)		
Date debt	was incurred Ja	ın 2018 L	ast 4 digits of account number		
Add the	dollar value of you	ır entries in Column A d	on this page. Write that number he	ere: \$302,309.50	
	s the last page of your control of the state	our form, add the dollar	value totals from all pages.	\$302,309.50	
Part 2:	List Others to B	e Notified for a Debt	That You Already Listed		
trying to than one	collect from you for creditor for any of	r a debt you owe to son	neone else, list the creditor in Part	that you already listed in Part 1. For exam : 1, and then list the collection agency here itors here. If you do not have additional pe	e. Similarly, if you have more
	me, Number, Street, utchens Law Fi	City, State & Zip Code		On which line in Part 1 did you enter the cre	editor?
	230 Fairview Ro	,		Last 4 digits of account number	

Page 21 of 56 Document Fill in this information to identify your case: Debtor 1 Karen Janeen Williams First Name Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name WESTERN DISTRICT OF NORTH CAROLINA United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount \$0.00 2.1 Internal Revenue Service \$0.00 \$0.00 Last 4 digits of account number Priority Creditor's Name **Centralized Insolvency Operation** When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated

■ No

☐ Yes

☐ Other. Specify

For Notice Purposes Only

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Der	Karen Janeen Williams		Case II	uffiber (if know)		
2.2	North Carolina Department of Revenue	Last 4 digits of account number	4869	\$33,692.42	\$0.00	\$33,692.42
	Priority Creditor's Name PO Box 1168 Polaries NC 27602	When was the debt incurred?	2012			
	Raleigh, NC 27602  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the o	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	_			
	■ No	Other. Specify	. , ,			
	Yes	Individual	ncomeTa	ixes		
	1					
2.3	North Carolina Department of Revenue	Last 4 digits of account number	4869	\$62,421.53	\$62,421.53	\$0.00
	Priority Creditor's Name					
	PO Box 1168	When was the debt incurred?	2011			
	Raleigh, NC 27602  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	□ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the o	overnment		
	Is the claim subject to offset?	Claims for death or personal injury	_			
	■ No	Other. Specify	,			
	Yes	Taxes				
	1					
2.4	North Carolina Department of Revenue	Last 4 digits of account number	4869	\$17,481.68	\$17,481.68	\$0.00
	Priority Creditor's Name					
	PO Box 1168	When was the debt incurred?	2012			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	□ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	OU OWE the o	overnment		
	Is the claim subject to offset?	Claims for death or personal injury	_			
	■ No	Other. Specify	. , , 50			
	Yes	Withholdin	g Taxes			

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Page 23 of 56 Document Case number (if know) Debtor 1 Karen Janeen Williams \$0.00 2.5 \$0.00 U.S. Attorney Last 4 digits of account number \$0.00 Priority Creditor's Name **Bankruptcy Division** When was the debt incurred? 227 W. Trade St #1650 Charlotte, NC 28202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes For Notice Purposes Only 2.6 **U.S. Attorney General** Last 4 digits of account number \$0.00 \$0.00 \$0.00 Priority Creditor's Name 9001 Mail Service Center When was the debt incurred? Raleigh, NC 27699 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes For Notice Purposes Only 2.7 Last 4 digits of account number \$0.00 **United States Attorney** \$0.00 \$0.00 Priority Creditor's Name Federal Courthouse Rm 233 When was the debt incurred? 100 Otis Street Asheville, NC 28801 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes For Notice Purposes Only Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?

 $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of

Page 24 of 56 Case number (if know) Document Debtor 1 Karen Janeen Williams

art 2.			
			Total claim
Navient	Last 4 digits of account number	4869	\$150,00
Nonpriority Creditor's Name			
Department of Education Loan	When was the debt incurred?	2018	_
Servicing			
PO Box 9635			
Wilkes Barre, PA 18773-9635  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	· •	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		_
	Student Lo	an	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 113,595.63
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 113,595.63
	01	On the other con-	01	Total Claim
Total	6f.	Student loans	6f.	\$ 150,000.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 150,000.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		17(7(.1)11)	.111 1 71111. 7 . 7 (71 . 10)	
Fill in this infor	mation to identify your	case:		
Debtor 1	Karen Janeen Wi	lliams		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	OF NORTH CAROLINA	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Verizon Wireless
500 Technology Dr.
Suite 550
Weldon Spring, MO 63304

State what the contract or lease is for

Cell Phone Contract

		Docume	ent Page 26 of	f 56	
Fill in this	information to identify your	case:			
Debtor 1	Karen Janeen W	illiams			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT C	OF NORTH CAROLINA		
Case numb	er				
(if known)				☐ Check if this is an	
				amended filing	
Official	Form 106H				
	ule H: Your Cod	lobtors		40/45	
Sched	ule n. Your Cod	eptors		12/15	
your name	and case number (if known rou have any codebtors? (if	). Answer every question		o this page. On the top of any Additional Pages, write as a codebtor.	
<b>.</b>					
■ No □ Yes					
⊔ Yes					
	in the last 8 years, have yo a, California, Idaho, Louisiana			y? (Community property states and territories include ngton, and Wisconsin.)	
■ No.	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 6G). Use Schedule D, Schedule E/F, or Schedule G to	ial
C	Column 1: Your codebtor			Column 2: The creditor to whom you owe the deb	t
	ame, Number, Street, City, State and Z	ZIP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_	Number Street			_	
	City	State	ZIP Code		
					_
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
<u> </u>	Number Street			_	
C	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:				1				
	otor 1 Karen Jane									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	E WESTERN DISTRIC	T OF NORTH CAROL	INA						
	se number 		-			☐ A su	mended to	showing	postpetition clowing date:	hapter
0	fficial Form 106I					MM	/ DD/ YY	YY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not inclu	de infor	matio	on about yo	ur spous	se. If mor	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed			l Employe			
	information about additional	proyon status	☐ Not employed				Not emp	oloyed		
	employers.	Occupation	psychologist							
	Include part-time, seasonal, or self-employed work.	Employer's name	LifeWorks US In	ıc,						
	Occupation may include student or homemaker, if it applies.	Employer's address	201 17th Street Atlanta, GA 303		30					
		How long employed t	here? 6 montl	ns						
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any l	line, write \$0	) in the sp	oace. Inclu	ude your non-f	filing
	u or your non-filing spouse have messpace, attach a separate sheet to		ombine the information	n for all	emplo	oyers for tha	t person	on the line	es below. If yo	u need
						For Debto		For Debt	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,51	1.00	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	

4,511.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	otor 1	Karen Janeen Williams	-	Cas	e number ( <i>if known</i> )		
				Fo	or Debtor 1		Debtor 2 or
	Cop	y line 4 here	4.	\$	4,511.00	\$	N/A
5.	List	all payroll deductions:					
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	925.84	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	268.67	\$_	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$_	N/A
	5e.	Insurance	5e.	\$	183.99	\$_	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$ _	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,378.50	\$	N/A
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,132.50	\$	N/A
8.	List	all other income regularly received:		-	· · · · · · · · · · · · · · · · · · ·	_	
	8a.	Net income from rental property and from operating a business, profession, or farm					
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	1,900.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$_	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		•		-	1471
		Include alimony, spousal support, child support, maintenance, divorce					
		settlement, and property settlement.	8c.	\$_	0.00	\$_	N/A
	8d.	Unemployment compensation	8d.	\$_	0.00	\$_	N/A
	8e.	Social Security	8e.	\$_	0.00	\$_	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	_	Specify:	_ 8f.	\$_	0.00	\$_	N/A
	8g.	Pension or retirement income	8g.	\$_	0.00	\$_	N/A
	8h.	Other monthly income. Specify: Rental Property Income/ Gastonia property	8h.+	\$	750.00	+ \$	N/A
	011.	Rental Property Income/ Gastonia property		\$	300.00	` <b>\$</b> -	N/A
		Rental of room in current home	_	\$	500.00	\$	N/A
		Nontal of Footh in Garrone Homo	_		000.00	_	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	3,450.00	\$_	N/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		6,582.50 + \$		N/A = \$ 6,582.50
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		Schedule J. 11. +\$0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$ <b>6,582.50</b>
							Combined monthly income
13.	Doy	you expect an increase or decrease within the year after you file this form?	?				,
	_	No. Yes. Explain:					
		I OO. EAPIGIII.					

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Fill	in this informa	tion to identify yo	our case:							
Deb	tor 1	Karen Janee	n Willian	าร		Ch	eck if thi	is is:		
								nended filing		
	tor 2 ouse, if filing)								ving postpetition chap the following date:	ter
(Spc	ouse, ii iiiiig)						10 64	Jenses as or	the following date.	
Unit	ed States Bankr	ruptcy Court for the	: WESTE	RN DISTRICT OF NORT	TH CAROLINA		MM /	DD / YYYY		
	e number nown)									
Of	fficial Fo	rm 106J								
		J: Your	Fynar	1808						12/15
Be info	as complete a ormation. If m nber (if know t 1: Descr	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry questio	If two married people a ch another sheet to this						
1.	Is this a joir	nt case?								
	■ No. Go to □ Yes. <b>Doe</b>		in a separa	ate household?						
	ПΝ		•							
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate Housel	nold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		De ag	ependent's Je	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Son		_ 14	4	■ Yes	
								_	□ No	
					Son		17	7	Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	Do vour ext	oenses include	_						□ res	
0.	expenses o	f people other t d your depende	han 🗖	No Yes						
	t 2: Estim	ate Your Ongoi	ng Monthl	y Expenses						
exp				uptcy filing date unless y is filed. If this is a sup						
				government assistance luded it on <i>Schedule I:</i>						
(Off	ficial Form 10	)6I.)					_	Your expe	enses	
4.		or home owners		ses for your residence. r lot.	Include first mortgage	4.	\$		0.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	s, or renter	's insurance		4b.	· —		0.00	
	4c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c.	\$		0.00	
_		owner's associat				4d.	\$		0.00	
5	Additional r	mortgage navm	ents for vo	our residence, such as hi	ome equity loans	5	\$		0.00	

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Deptor 1 Karen Jan	een Williams	Case num	ber (if known)	
6. Utilities:				
	neat, natural gas	6a.	\$	500.00
	er, garbage collection	6b.	·	0.00
·	cell phone, Internet, satellite, and cable services	6c.		240.00
6d. Other. Spec	•	6d.	\$	0.00
Food and housek	•	7.	\$	800.00
	ildren's education costs	8.	\$	0.00
	, and dry cleaning	9.	·	0.00
). Personal care pro		10.		0.00
. Medical and dent		11.		0.00
	nclude gas, maintenance, bus or train fare.	• • • • • • • • • • • • • • • • • • • •	<u> </u>	0.00
Do not include car		12.	\$	150.00
	ubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Charitable contril	butions and religious donations	14.	\$	0.00
5. Insurance.	•			
Do not include insu	urance deducted from your pay or included in lines 4 or 20.			
15a. Life insurand	ce	15a.	\$	0.00
15b. Health insur	rance	15b.	\$	0.00
15c. Vehicle insu	ırance	15c.	\$	180.00
15d. Other insura	ance. Specify:	15d.	\$	0.00
. Taxes. Do not incl	ude taxes deducted from your pay or included in lines 4 or 2	20.		
Specify:	,	16.	\$	0.00
7. Installment or lea				
17a. Car paymen	nts for Vehicle 1	17a.	\$	0.00
17b. Car paymen	nts for Vehicle 2	17b.	\$	0.00
17c. Other. Spec	ify:	17c.	\$	0.00
17d. Other. Spec	ify:	17d.	\$	0.00
3. Your payments o	f alimony, maintenance, and support that you did not re	port as		
	our pay on line 5, Schedule I, Your Income (Official Forn	106l). 18.	· .	0.00
Other payments y	you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	ty expenses not included in lines 4 or 5 of this form or			
20a. Mortgages o		20a.		0.00
20b. Real estate		20b.		45.00
	omeowner's, or renter's insurance	20c.	·	0.00
20d. Maintenance	e, repair, and upkeep expenses	20d.	\$	50.00
20e. Homeowner	's association or condominium dues	20e.	\$	0.00
<ol> <li>Other: Specify:</li> </ol>		21.	+\$	0.00
) Coloulata vava		<del></del>		
<ol> <li>Calculate your median</li> <li>22a. Add lines 4 th</li> </ol>	•		\$	1,965.00
	<u> </u>	10612	\$	1,903.00
	(monthly expenses for Debtor 2), if any, from Official Form	1003-2	<u>                                    </u>	
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	1,965.00
3. Calculate your me	onthly net income.			
•	2 (your combined monthly income) from Schedule I.	23a.	\$	6,582.50
	nonthly expenses from line 22c above.	23b.		1,965.00
_00. Oopy your ii	5	200.	<b>*</b>	1,300.00
23c. Subtract voi	ur monthly expenses from your monthly income.			
	s your monthly net income.	23c.	\$	4,617.50
	,			
	increase or decrease in your expenses within the year			
	expect to finish paying for your car loan within the year or do you ex	spect your mortgage	payment to increa	se or decrease because of
	rms of your mortgage?			
No.				
☐ Yes. □	Explain here:			

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Ellis distriction					
	mation to identify your				
Debtor 1	Karen Janeen Wi	Iliams Middle Name	Last Name		
Debtor 2	ristrano	Wilder Name	Last Namo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	OF NORTH CAROLINA		
Case number					
(if known)					☐ Check if this is an amended filing
Official Forr					
<b>Declarat</b>	tion About a	ın Individual	Debtor's Sc	hedules	12/15
	8 U.S.C. §§ 152, 1341, 1 n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration an	d
X /s/ Kar	en Janeen Williams		X		
Karen	Janeen Williams re of Debtor 1		Signature of E	Debtor 2	
Date	March 18, 2019		Date		

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Fill	l in this inform	ation to identify you	case:						
_	btor 1	Karen Janeen W							
De	DIOI I	First Name	Middle Name	Last Name					
l	btor 2 ouse if, filing)	First Name	Middle Name	Last Name					
	-	kruptcy Court for the:	WESTERN DISTRICT OF	NORTH CAROLINA					
		aptoy Countries uno							
	se number nown)					Check if this is an amended filing			
	fficial For		Affaira far Individ	duala Eilina far B	ankwintov				
				duals Filing for B		4/16			
info	rmation. If mo	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you				
	<u> </u>	). Answer every que:	stion.						
Pa	rt 1: Give De	etails About Your Ma	rital Status and Where You	Lived Before					
1.	What is your	current marital statu	s?						
	<ul><li>☐ Married</li><li>■ Not married</li></ul>	ied							
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?					
	■ No	No							
	_	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .				
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
<b>3.</b> stat					ity property state or territor co, Texas, Washington and V				
	■ No								
	☐ Yes. Mak	ce sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).					
Pa	rt 2 Explain	the Sources of You	r Income						
4.	Fill in the total	amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?			
	□ No								
	Yes. Fill i	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$36,742.00	☐ Wages, commissions, bonuses, tips				
			Operating a business		☐ Operating a business				

Official Form 107

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Case number (if known)

Document Debtor 1 Karen Janeen Williams

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$3,912.88	☐ Wages, comm bonuses, tips	nissions,	
	☐ Operating a business		☐ Operating a b	usiness	
For the calendar year before that: (January 1 to December 31, 2017)	☐ Wages, commissions, bonuses, tips	\$41,500.00	☐ Wages, comm	nissions,	
	Operating a business		☐ Operating a b	usiness	
<ul> <li>Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas</li> <li>List each source and the gross inco</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>	er that income is taxable. Exa pensions; rental income; inter e and you have income that y	amples of other income are a est; dividends; money collec- you received together, list it of	ted from lawsuits; ronly once under Deb	oyalties; and otor 1.	
	Debtor 1		Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Rental Income	\$2,250.00			
For last calendar year: (January 1 to December 31, 2018)	Rental Income	\$6,500.00			
For the calendar year before that: (January 1 to December 31, 2017)	Rental Income	\$7,097.00			
Part 3: List Certain Payments You	Made Before You Filed for I	Bankruptcv			
<u> </u>					
<ul> <li>Are either Debtor 1's or Debtor 2'</li> <li>No. Neither Debtor 1 nor D individual primarily for a</li> </ul>		mer debts. Consumer debt	s are defined in 11 L	J.S.C. § 101	(8) as "incurred by an
During the 90 days befo	re you filed for bankruptcy, die	d you pay any creditor a tota	l of \$6,425* or more	?	
□ No. Go to line 7.					
Yes List below e paid that cre	ach creditor to whom you paid editor. Do not include paymen payments to an attorney for th	ts for domestic support oblig			
	on 4/01/19 and every 3 years		or after the date of	adjustment.	
Yes. <b>Debtor 1 or Debtor 2 o</b> During the 90 days befo	r both have primarily consure you filed for bankruptcy, die		I of \$600 or more?		
□ No. Go to line 7.					
_		d - 1-1-1-1-1-0000	Laboratoria de la constanta de		and Plan D
include payı	ach creditor to whom you paid ments for domestic support of this bankruptcy case.				
Creditor's Name and Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for

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Case number (if known) Document

Debtor 1 Karen Janeen Williams

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Gaston County Tax Administrator PO Box 1578 Gastonia, NC 28053	Feb 13, 2019	\$1,399.31	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other Ta	ard payment s or vendors
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gel control, or owner of 20% (	neral partners; partners or more of their voting	erships of which y g securities; and a	ou are a genera any managing a	al partner; corporations gent, including one for
	No					
	☐ Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		yments or transfer a	any property on	account of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in a				
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Forslosure of Real Property Under Deed of Trust Executed by Karen J. Williams held by Harvey Schonbrun, Trustee			Luther King	☐ On appeal	
	19S000139		Gastonia, NC 28052		Hearing on April 3, 2019	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garn	shed, attached	d, seized, or levied?
	<ul><li>No. Go to line 11.</li><li>☐ Yes. Fill in the information below.</li></ul>					
	Creditor Name and Address	Describe the Property		Date	•	Value of the
		Explain what happened				property

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De	btor 1 Karen Janeen Williams	Document	Case number	er (if known)	
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed  No  Yes. Fill in the details.			nstitution, set off any a	mounts from your
	Creditor Name and Address	Describe the action	on the creditor took	Date action was	Amoun
	Orealter Name and Address	Describe the dotte	in the oreator took	taken	Amoun
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		property in the possession of ar	n assignee for the bene	fit of creditors, a
	☐ Yes				
Pai	rt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give an	y gifts with a total value of more	than \$600 per person?	,
	Gifts with a total value of more than \$600	Describe the	aifts	Dates you gave	Value
	per person	20000	<b>3</b>	the gifts	
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift or cor		y gifts or contributions with a to	otal value of more than	\$600 to any charity
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		at you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
	Within 1 year before you filed for bankrupt or gambling?	tcy or since you filed	for bankruptcy, did you lose an	ything because of thef	t, fire, other disaste
	■ No □ Yes. Fill in the details.				
	how the loss occurred	nclude the amount tha	ce coverage for the loss t insurance has paid. List pending e 33 of Schedule A/B: Property.	Date of your loss	Value of property los
		nsurance claims on in	e 33 di Genedale A.B. I Toperty.		
Pa	rt 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or princlude any attorneys, bankruptcy petition pre	eparing a bankruptcy	y petition?		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address	Description a transferred	and value of any property	Date payment or transfer was made	Amount o paymen

Law Offices of Beth B. Carter, PLLC **PO Box 1553** Denver, NC 28037 beth@bbcarterlaw.com

Statement of Financial Affairs for Individuals Filing for Bankruptcy

\$500 for attorney fees, \$310 for court filing fee

\$810.00

Person Who Made the Payment, if Not You

March, 2019

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Case number (if known)

Debtor 1 Karen Janeen Williams

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and v transferred	Description and value of any property transferred			Amount of payment		
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis   No  Yes. Fill in the details.	ness or financial affa as security (such as t	iirs? he granting of a s					
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred		payment	e any property or is received or debts exchange	Date transfer was made		
	New Image Auto Imports 395 East Plaza Mooresville, NC 28115	2007 S550 Merc sold in May 201		Proceeds used to pay property taxes and purchase BMW SUV		May 2017		
19.	None Within 10 years before you filed for bankruptcy		y property to a s	elf-settled t	rust or similar device (	of which you are a		
	<ul><li>beneficiary? (These are often called asset-protect</li><li>No</li><li>Yes. Fill in the details.</li></ul>	tion devices.)						
	Name of trust	Description and v	alue of the prope	erty transfe	rred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	rage Units				
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, association No  Yes. Fill in the details.	ther financial accour	nts; certificates o	of deposit; s				
		ast 4 digits of count number			eate account was losed, sold, noved, or ransferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, any	/ safe depos	sit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the	e contents	Do you still have it?		

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22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?			
	_	•	,,,				
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City,	Describe the contents	Do you still have it?			
		State and ZIP Code)					
Par	9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	10: Give Details About Environmental Inform	nation					
For	he purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ironmental law? Include settlements	and orders.			
	No						
	Yes. Fill in the details.  Case Title	Court or agency	Nature of the case	Status of the			
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case			
Par	11: Give Details About Your Business or Co	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to any	y business?			
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time				
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)						

Debtor 1

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Case number (if known) Document Debtor 1 Karen Janeen Williams

☐ A partner in a partnership		
☐ An officer, director, or managing ex	ecutive of a corporation	
☐ An owner of at least 5% of the votir	ng or equity securities of a corporation	
■ No. None of the above applies. Go to	Part 12.	
Yes. Check all that apply above and fil	I in the details below for each business.	
Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	·
Comprehensive Counseling	Counseling	Dates business existed EIN:
Coaching	Counseling	
& Consulting PLLC 253 Frankling Ct Stanley, NC 28164		From-To April 2016 to Current
Adaptive Interventions Group, LLC 253 Franklin Ct	Counseling	EIN:
Stanley, NC 28164		From-To March 2018 to Current
■ No □ Yes. Fill in the details below. Name Address	Date Issued	
(Number, Street, City, State and ZIP Code)		
Part 12: Sign Below		
	false statement, concealing property, or ob	leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.
Date March 18, 2019	Date	
Did you attach additional pages to <i>Your Statem</i> ■ No □ Yes	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankro		

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Karen Janeen Williams					
Debtor 2 (Spouse, if filing)						
United States B	ankruptcy Court for the: Western District of North Carolina					
Case number (if known)						

Check	Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1	Calculate Your Average Monthly Income							
1.	١	What is your marital and filing status? Check or	ne c	only.					
	ı	Not married. Fill out Column A, lines 2-11.							
	[	☐ Married. Fill out both Columns A and B, lines 2-	-11						
t	101 he	in the average monthly income that you received fror (10A). For example, if you are filing on September 15, the 6 months, add the income for all 6 months and divide the uses own the same rental property, put the income from t	e 6- tota	month period would be Mar al by 6. Fill in the result. Do	ch 1 throu not includ	igh . le ai	August 31. If the amount m	ount of your monthly incom ore than once. For example	e varied during e, if both
							olumn A ebtor 1	Column B Debtor 2 or non-filing spouse	
2.		Your gross wages, salary, tips, bonuses, overti payroll deductions).	me	, and commissions (be	efore all	\$_	4,511.00	\$	
3.		Alimony and maintenance payments. Do not inc Column B is filled in.	lud	e payments from a spou	ise if	\$_	0.00	\$	
4.	f	All amounts from any source which are regular of you or your dependents, including child support of your dependents, including child support of your house and roommates. Do not include payments from a second listed on line 3.	por eho	t. Include regular contrib ld, your dependents, par	outions rents,	\$	0.00	\$	
5.		Net income from operating a business, profession, or farm		Debtor 1					
		Gross receipts (before all deductions)	\$	1,500.00					
	(	Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from a business, profession, or farm	\$	1,500.00	Copy here -> S	\$_	1,500.00	\$	
6.	1	Net income from rental and other real property		Debtor 1					
	(	Gross receipts (before all deductions)	\$	2,250.00					
	(	Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from rental or other real property	\$	2,250.00	Copy here -> S	\$	2,250.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Document Page 40 of 56 Karen Janeen Williams Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 8.261.00 +|\$ 8,261.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 8,261.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 8,261.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 8,261.00 15a. Copy line 14 here=>

15b. The result is your current monthly income for the year for this part of the form.

Multiply line 15a by 12 (the number of months in a year).

**x** 12

99,132.00

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Karen Janeen Williams Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: NC 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 3 66.361.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 8.261.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 8,261.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 8,261.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 99,132.00 \$ 20b. The result is your current monthly income for the year for this part of the form 66,361.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Karen Janeen Williams Karen Janeen Williams Signature of Debtor 1 Date March 18, 2019 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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									_									
Fill	in this inf	ormation to iden	tify you	case:														
Deb	tor 1	Karen Janee	n Willia	ms					_									
	tor 2 ouse, if filir	ng)							-									
Unit	ed States	Bankruptcy Court	for the:	Wester	rn District	t of Nor	th Caro	olina	_									
	e number nown)								-			□ Ch	neck if	this is	an am	ended	filing	
	ial Form 1 apter	122C-2 13 Calcul	latior	of `	Your	Dis	pos	able	In	com	ie							04/16
		form, you will ne Period (Official Fo			ted copy	y of <i>Ch</i>	apter 1	13 Stater	men	nt of You	ur Curr	ent Mon	thly In	come a	nd Cal	culatio	n of	
spac addit	e is need tional pag	ee and accurate a ed, attach a sepa es, write your na	rate she ime and	et to thi case nu	is form, I ımber (if	Include known	the lin											ore
Part	iii Ca	alculate Your Dec	Juctions	IIOIII 1	our inco	me												
th	ne questic	al Revenue Servio ons in lines 6-15. n may also be ava	To find t	he IRS	standard	ds, go d	online เ	using th										
e	xpenses if	expense amounts they are higher th d do not deduct ar	an the st	andards	. Do not	include	any op	erating e	expe	enses th	at you	subtracte	d from	income				
lf	your expe	nses differ from m	onth to n	nonth, e	nter the a	average	e expen	ise.										
N	ote: Line r	numbers 1-4 are n	ot used i	n this for	rm. These	e numb	ers app	oly to info	orma	ation rec	quired b	y a simila	ar form	used ir	n chapte	er 7 cas	es.	
5.	The nu	umber of people	used in	determi	ning you	ır dedu	ıctions	from inc	com	ne								
	plus th	he number of peo e number of any a mber of people in	additional	depend									1		3			
N	ational St	andards	You mu	st use th	ne IRS Na	ational \$	Standa	ırds to an	swe	er the qu	uestions	in lines	6-7.					
6.		clothing, and oth ards, fill in the dolla							ed ii	in line 5	and the	e IRS Na	tional		\$		1,384	4.00
7.	the dol people	-pocket health callar amount for out who are 65 or old than this IRS amo	-of-pocke derbeca	et health use olde	care. Ther people	ne numb have a	ber of pa higher	eople is r IRS allo	split wan	t into two	o categ	oriespe	ople w	ho are i	under 6	5 and		

Entered 03/18/19 14:13:48 Case 19-30347 Doc 1 Filed 03/18/19 Document Page 43 of 56 Karen Janeen Williams Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 3 7c. Subtotal. Multiply line 7a by line 7b. 156.00 Copy here=> 156.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 7g. **Total.** Add line 7c and line 7f 156.00 156.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 585.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 918.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Harvey Schonbrun 3,470.00 Copy Repeat this amount 3,470.00 3,470.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense.

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

Subtract line 9b (total average monthly payment) from line 9a (mortgage

or rent expense). If this number is less than \$0, enter \$0.

\$ 0.00

0.00

Copy

here=>

0.00

Explain why:

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Karen Janeen Williams Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 0.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment Repeat this Conv amount on **Total Average Monthly Payment** 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment 0.00 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 178.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may

also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Karen Janeen Williams Case number (if known)

Oth	er Nece		In addition to the expense the following IRS categori		listed above,	, you are allowed your monthly expenses	s for		
16.	self-em your pa and su	nployment taxes, soci ay for these taxes. Ho obtract that number fro	ial security taxes, and Medowever, if you expect to recommend the total monthly amou	dicare taxes ceive a tax i	. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	0.00	
		include real estate, s	•				<u> </u>		
17.		untary deductions: 1 putions, union dues, a		eductions the	at your job red	quires, such as retirement			
				job, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00	
18.	filing to Do not	ogether, include paym	nents that you make for yo r life insurance on your de	ur spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00	
19.	19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.								
20			nly amount that you pay fo	•	• • •	Ğ			
20.		a condition for your jo		i <del>c</del> uucalion	iliai is eililei i	equirea.			
				ant abild if n	a public oduc	otion is available for similar convince	\$	0.00	
						ation is available for similar services.	Ψ		
21.			ly amount that you pay for r any elementary or secon		-	sitting, daycare, nursery, and preschool.	\$	0.00	
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.								
			nce or health savings acco		•		\$	0.00	
20.	for you phone income Do not	and your dependent service, to the extent e, if it is not reimburse include payments for	s, such as pagers, call wa necessary for your healthed by your employer. r basic home telephone, ir	iting, caller in and welfare	dentification, e or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	40.00	
24.		II of the expenses al nes 6 through 23.	lowed under the IRS exp	ense allow	ances.		\$	2,343.00	
Add		Expense Deduction	s These are additional Note: Do not include						
25.	insurar					ses. The monthly expenses for health ly necessary for yourself, your spouse, c	r		
	Health	insurance		\$	0.00				
	Disabil	lity insurance		\$	0.00				
	Health	savings account		+ \$	0.00				
				1 _	0.00	Committee the second	•	0.00	
	Total			\$	0.00	Copy total here=>	\$	<u> </u>	
	Do you	u actually spend this t		<u> </u>	0.00	Copy total nere=>	\$	0.00	
		No. How much do ye			0.00	Copy total nere=>	\$	0.00	
	Do you	No. How much do yo	ou actually spend?	\$			<b>&gt;</b>	0.00	
26.	Do you  Continuous house	No. How much do you Yes nued contributions to be to pay for the reasons to be to pay for member to the total	ou actually spend?  o the care of household onable and necessary car	\$ or family me and suppowho is unabl	nembers. The ort of an elder e to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00	
	Do you  Continu continu your ho include Protect	No. How much do you Yes nued contributions to ue to pay for the reasons to an action against family	o the care of household onable and necessary car of your immediate family vaccount of a qualified ABLi violence. The reasonably	or family me and suppowho is unable program.	nembers. The ort of an elder e to pay for s 26 U.S.C. § 5. monthly expe	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may			

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ebtor 1	Karen Janeen Williams	Case number (if kn	nown)				
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and opera	ating ex	xpense	es on		
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy costs included inergy costs	in exp	enses	on line		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that th	ne add	itional		\$_	0.00
29.	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expenses (spendent children who are younger than 18 years old to a	(not me attend	ore tha a priva	an ate or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why not already accounted for in lines 6-23.	the ar	mount			
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the date	of adj	justme	nt.	\$_	160.42
30.	. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		ional allowance, go online using the link specified in the so be available at the bankruptcy clerk's office.	separa	ate			
	You must show that the additional amount of	claimed is reasonable and necessary.				\$_	46.00
31.	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga	ancial					
	Do not include any amount more than 15% of your gross monthly income.						0.00
32.	2. Add all of the additional expense deductions. Add lines 25 through 31.						
Ded	uctions for Debt Payment						
	For debts that are secured by an interest oans, and other secured debt, fill in lines	in property that you own, including home mortgages 33a through 33e.	s, vehi	cle			
	To calculate the total average monthly paym creditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each sonkruptcy. Then divide by 60.	ecureo	t			
	Mortgages on your home					Avera paym	ige monthly
33a.	Copy line 9b here				=>	\$	3,470.00
	Loans on your first two vehicles						
33b.	O a mar l'a a 40h h a ma				=>	\$	0.00
33c.					=>	\$	0.00
33d.	List other secured debts:						
	e of each creditor for other secured debt	Identify property that secures the debt	inclu	paym de taxe suranc	es		
				No			
	-NONE-			Yes		\$	
				No			
				Yes		\$	
			_			Ψ	
			_	No			
				Yes	+	\$	
					ר		

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ebtor 1	Kare	en Janeen Williams			Case	number (if known)		
	-	debts that you listed in lir property necessary for yo		•				
	No.	Go to line 35.						
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	ossession of your property	addition to the control (called the control	ne payments cure amount).			
Name	of the	creditor	Identify property that see	cures the deb	ot .	Total cure amount	Monthly amount	
Harv	rey So	chonbrun	253 Franklin Ct Sta Gaston County Purchased in June Tax Value \$577,006	2007 for \$		30,861.00	÷ 60 = \$	514.35
					\$		÷ 60 = +\$	
					Total	\$ 514.35	Copy total here=> \$	514.35
25 <b>Do</b>	. vou c	owe any priority claims - s	uch as a priority tax, chi	ld support	or alimony - the			
		due as of the filing date of				al		
	No.	Go to line 36.						
	Yes.	Fill in the total amount of a ongoing priority claims, su			de current or			
		Total amount of all past-o	due priority claims			79,903.21	÷60 \$_	1,331.72
36. <b>Pro</b>	ojecte	d monthly Chapter 13 pla	n payment		5	4,600.00		
Off the To	fice of Exec find a li	nultiplier for your district as the United States Courts (four utive Office for United State ist of district multipliers that incl instructions for this form. This lis	or districts in Alabama and es Trustees (for all other die udes your district, go online us	North Carolistricts). Sing the link sp	ina) or by ecified in the	4.85		
Ave	erage	monthly administrative expe	ense			\$223.10	Copy total here=> \$	223.10
		of the deductions for deb as 33e through 36.	ot payment.				\$	5,539.17
Total [	Deduc	tions from Income						
38. <b>Ad</b>	ld all c	of the allowed deductions						
		ne 24, All of the expenses a e allowances		\$	2,343.00	-		
		ne 32, All of the additional e			206.42	_		
С	opy lin	ne 37, All of the deductions	for debt payment	+\$	5,539.17			
T	otal de	eductions		\$	8.088.59	Conv total here=>	·	8.088.59

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Karen Janeen Williams Debtor 1 Case number (if known) Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 8.261.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 8.088.59 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Сору 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 8.088.59 8.088.59 here=> -\$ 172.41 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ Decrease ☐ 122C-2 ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease □ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Debtor 1	Karen Janeen Williams	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.
-	/s/ Karen Janeen Williams Karen Janeen Williams Signature of Debtor 1	
	March 18, 2019 MM / DD / YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-30347 Doc 1 Filed 03/18/19 Entered 03/18/19 14:13:48 Desc Main Document Page 54 of 56

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Western District of North Carolina

In re	Karen Janeen Williams		Case No		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR D	EBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(becompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be pa	d to me, for services re	
	For legal services, I have agreed to accept		\$	4,500.00	
	Prior to the filing of this statement I have received			500.00	
	Balance Due		\$	4,000.00	
2. \$	<b>3_310.00</b> of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. <b>I</b>	I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are me	mbers and associates o	f my law firm.
[	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				aw firm. A
6. I	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankruptcy	case, including:	
b c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor [Other provisions as needed]  Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ment of affairs and plan which is and confirmation hearing, and educe to market value; exems as needed; preparation	may be required; ad any adjourned he	earings thereof;	filing of
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, judi	service: cial lien avoidan	ces, relief from sta	y actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for	representation of the c	lebtor(s) in
M	arch 18, 2019	/s/ Beth B. Carter			es of my law firm.  The property of the second of the seco
	ate	Beth B. Carter 24	642		
		Signature of Attorne The Law Offices		, PLLC	
		P.O. Box 1553			
		Denver, NC 28037 704-966-8028 Fa			
		beth@bbcarterlav			
		Name of law firm			

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### **United States Bankruptcy Court** Western District of North Carolina

In re Karen Janeen Williams		Case No.					
	Debtor(s)	Chapter	13				
VERIFICATION OF CREDITOR MATRIX							
and a second D break and a self-	death and the literature of the literature of		. C1 / 1				
e above-named Debtor nereby verifies	that the attached list of creditors is true and	correct to the best	of ms/ner knowledge.				
Date: March 18, 2019	/s/ Karen Janeen Williams						
	Karen Janeen Williams						

Signature of Debtor

PO Box 1578 Gastonia, NC 28053

Harvey Schonbrun Trustee of The Futura Circuits Corp. Revocable Mortgage Trust 1802 N. Morgan Street Tampa, FL 33602-2328

Hutchens Law Firm 6230 Fairview Road, Suite 315 Charlotte, NC 28210-3253

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Navient Department of Education Loan Servicing PO Box 9635 Wilkes Barre, PA 18773-9635

North Carolina Department of Revenue PO Box 1168 Raleigh, NC 27602

U.S. Attorney Bankruptcy Division 227 W. Trade St #1650 Charlotte, NC 28202

U.S. Attorney General 9001 Mail Service Center Raleigh, NC 27699

United States Attorney Federal Courthouse Rm 233 100 Otis Street Asheville, NC 28801

Verizon Wireless 500 Technology Dr. Suite 550 Weldon Spring, MO 63304